

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 29 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	Robert L. Best			
II. Name of lobbyist's partn	ership, firm or corporation, if a	any:		
Sulloway & Hollis, I	P.L.L.C.			
	tnership, firm or corporation)			
9 Capitol Street, Co	ncord, NH 03301			
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) 224-2341	(603)226-2404		e-mail_rbest@sulloway.com	
(Telephone)	(Fax	x)		
	Choose one – file separate repo ions which are not attributable	rts for each client, OR you may to any one client).	file a separate report for	
☐ All reportable transactions	s occurring in the months prior to	the reporting date relative to the f	following client:	
	e Medical Society			
	Name of Client as it appears on the L	obbyist Registration Form)		
OR ☐ All reportable transactions unrelated to any particular clients.		bbyist's family), or the lobbying fi	irm listed below which are	
IV. Date of Report : Apri Reports cover: Activity from		July 25, 2018	ere fator e	
	ber 31, 2018 from 7/1/18 to 9/30/18	January 30, 2019 1 activity from 10/1/18 to 12/31/18	3	
		e transactions made since the he Secretary of State's Office, Sta		
VI Clark Codd(4)	ute and attached.	, , , , ,		
VI. Check if additional report of the view of the vie		file Addendum A – Fees and Exp	enses	
	•	ou must file Addendum B- Repo		
•	family has made political contrib	outions, you must file Addendum	C- Political Contributions	
and complete to the best of m	B, RSA 14-C and RSA 664 and I	hereby swear or affirm that the for	regoing information is true	
Robert L. Best (Print Name of lobbyist)				